

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF THE ESTATE OF _____

☐ Amended

**Petition for
Termination of Trust**

For the following trust: _____

☐ Informal Administration

☐ Formal Administration

Case No. _____

UNDER OATH, I STATE:

1. I am the trustee(s) of this trust.
2. ☐ The terms of the decedent's will for termination of the trust are met, OR
☐ It is appropriate to terminate the trust for the following reason(s): _____ ☐ See attached

3. The names and mailing addresses of all interested persons and proposed distribution in this matter are:
☐ See attached

Name	Mailing Address	Proposed Final Distribution

4. Notice ☐ is waived by all persons entitled to notice.
☐ will be given to all persons entitled to notice.

5. The trustee's final account
☐ was filed.
☐ is filed with this petition.
☐ will be filed at a later date.

6. The closing certificate for fiduciaries
☐ was filed.
☐ is filed with this petition.
☐ will be filed at a later date.

I REQUEST THE COURT:

1. Approve all accounts of the trustee(s);
2. Authorize the termination of the trust;
3. Authorize the proposed final distribution, AND
4. Discharge the trustee(s).

State of _____

County of _____

Subscribed and sworn to before me on _____



Petitioner

Name Printed or Typed

Telephone Number

Address

Date

Notary Public/Court Official

Name Printed or Typed

My commission/term expires: _____

Form completed by: (Name)	
Address	
Telephone Number	Bar Number (If any)